



Attach Photo

APPLICATION FOR EMPLOYMENT WITH THE U.S. MISSION IN IRAQ

If your application does not provide all the information requested on this form and in the job vacancy announcement, you may lose consideration for a job.

1. Position(s) for which you are applying		2. Grade(s) applying for		3. Tribal Name	
4. Last Name (Grandfather's Name)	5. First Name	6. Middle Name (Father's Name)		7. Place and date of birth (Month, Day, Year)	
8. Present address				9. Phone numbers (home) (office) (cellular)	
10. City		11. Country		12. Social Security and/or National number	
13. Name at birth, if different from above		14. Have you ever been known by any other names? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, give names and explain circumstances			
15. Sex Male <input type="checkbox"/> Female <input type="checkbox"/>		16. Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Remarried			
17. Full name of spouse (If wife, maiden name)		18. Date of birth (Month, Day, Year)		19. Place of birth (city, country)	
20. Citizenship at birth		21. Present occupation		22. Present address in full	
23. Present citizenship		24. Children			
Child's name	Sex	Date of birth	Present address		Occupation

25. Previous addresses during past ten years				
Dates		Street and number	City (District/Province)	Country
From	To			

26. Do you have permanent U.S. resident status YES <input type="checkbox"/> NO <input type="checkbox"/> - List each country of which you have been a citizen		
Dates	Country	How citizenship was acquired

27. Father's name: Must go back 3 generations – Do NOT use tribal name as the last name.	28. Mother's name: Must go back 3 generations – Do NOT use tribal name as the last name.
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29. Are any relatives or family members employed by an agency or representative of a national or local government? If so, list name, relationship, agency and agency address. YES <input type="checkbox"/> NO <input type="checkbox"/>

30. Do you have any personal, business or professional contacts in the United States? if so, list name, business or occupation and address. YES <input type="checkbox"/> NO <input type="checkbox"/>

31. Travel (If you have traveled in any other countries give the dates, duration and purpose of such travel. If travel was in the United States, supply additional data, including type of visa, place and date of issuance, date and port of arrival in the United States, places of residence in the United States and the date and port of departure from the United States.)			
Country	Dates		Purpose
	From	To	

32. Memberships, societies, associations, clubs and other organizations of which you are now or have been a member, except religious or political affiliations.					
<u>Name</u>	<u>Address</u>	<u>Type</u>	<u>From</u>	<u>To</u>	<u>Office held</u>

33. Military service (Outline military service past or present, giving country of service, branch of service, unit or organization, specialty, highest rank held, dates of service, present rank, and date and type of discharge).

34. WORK EXPERIENCE

Describe your paid and nonpaid work experience related to the job for which you are applying.

1) Job title			
From (MM/YY)	To (MM/YY)	Monthly Salary	Hours per week
Employer's name and address		Supervisor's name and phone number	
Describe your duties and accomplishments			

2) Job title			
From (MM/YY)	To (MM/YY)	Monthly Salary	Hours per week
Employer's name and address		Supervisor's name and phone number	
Describe your duties and accomplishments			

3) Job title			
From (MM/YY)	To (MM/YY)	Monthly Salary	Hours per week
Employer's name and address		Supervisor's name and phone number	
Describe your duties and accomplishments			

4) Job title			
From (MM/YY)	To (MM/YY)	Monthly Salary	Hours per week
Employer's name and address		Supervisor's name and phone number	
Describe your duties and accomplishments			

35. May we contact your current supervisor?

YES ☐ NO ☐ → If we need to contact your current supervisor before making an offer, we will contact you first.

EDUCATION

36. Mark highest level completed. Some HS ☐ HS/GED ☐ Associate ☐ Bachelor ☐ Master ☐ Doctoral ☐

37. Last high school (HS) or GED school. Give the school's name, city, country, and year diploma or GED received.

38. College and universities attended. Do not attach a copy of your transcript unless requested.					
1) Name		Total credits earned		Major(s)	Degree – year (if any) received
		Semester	Quarter		
City	Country				
2) Name		Total credits earned		Major(s)	Degree – year (if any) received
		Semester	Quarter		
City	Country				
3) Name		Total credits earned		Major(s)	Degree – year (if any) received
		Semester	Quarter		
City	Country				

JOB-RELATED TRAINING, SKILLS AND AWARDS

39. **TRAINING:** List job-related training courses attended/completed:

Name and location of school or training place	Month and year attended		Degree/ certificate achieved	Subject
	From	To		

40. **LANGUAGE SKILLS:** Identify the language and indicate extent of your competence for each
(4 = Excellent; 3 = Good; 2 = Fair; 1 = Minimal; 0 = Not at all)

Language	Speak	Read	Write	Understand
English				
Arabic				

41. **COMPUTER SKILLS:** Which computer software programs (Microsoft Word, Microsoft Excel, Microsoft Outlook, etc.) have you used? Please list hereunder with degree of competence for each (4 = Excellent; 3 = Good; 2 = Fair; 1 = Minimal; 0 = Not at all)

Program	Degree	Program	Degree	Program	Degree

42. **SPECIAL QUALIFICATIONS, SKILLS, AWARDS & ACCOMPLISHMENTS:** List any special skills you possess; machine/equipment you can operate; and any honors, awards or fellowships you have received:

43. Do you have relatives employed at U.S. Embassy Baghdad or in Amman? YES ☐ NO ☐ If Yes, give names and relationship:

44. Have you ever been arrested or detained by any police or military authority? If so, name the authority, give time, place, reason and the disposition of court action.

45. **REFERENCES:** You **MUST list at least three** responsible persons not related to you by blood or marriage who are qualified to supply definite information regarding your character and ability to perform job duties. (Do not name supervisors listed in item 34 above.) Failure to provide the contacts and a means to reach them will result in the disqualification of your application.

Full name of reference	Mailing address	Telephone no.	Occupation

46. **APPLICANT CERTIFICATION:**

- I understand that any information I give may be investigated and that a false statement may be grounds for not hiring me or for dismissal if I am selected.
- I understand that, if I am provisionally selected, Embassy required security and full medical clearances are a prerequisite to continued employment.
- If I am selected, I consent to the release of information about my ability and fitness for employment by employers, schools, law enforcement agencies and other individuals and organizations to Embassy authorized investigators and personnel staff.
- I certify that, to the best of my knowledge, all of my statements are true, complete and made in good faith.

signature

date

Add any information not covered above which might affect your employment. Use extra blank pages, if necessary, for detailed answers number answers to correspond with questions.